

Hawaii CERC Project  
Cultures of Engagement in Residential Care  
Project Summary

Hawaii is one of eight states awarded a three-year **Substance Abuse and Mental Health Services Administration (SAMHSA)/ State Infrastructure Grant (SIG)** grant aimed at the reduction/elimination of seclusions and restraints (S/R) in hospital and residential care.

The acronym **CERC** (Cultures of Engagement in Residential Care) has been chosen to identify this grant-funded project. The Hawaii CERC project is part of CAMHD's ongoing practice development initiative to continue refining best practices and promote the use of evidence-based services for children, adolescents and families. Although minimizing the use of restraint and seclusion is an important goal of the project, CERC is also designed to improve residential care practices in settings that use these techniques seldom, in order to address other difficulties such as frequent violence, running away, etc.

The three main components of this project include:

1. An Executive Training Seminar by the National Association of State Mental Health Program Directors (NASMHPD) in conjunction with the National Technical Assistance Center for State Mental Health Planning (NTAC);
2. Development of a Best Practices Network (BPN); and
3. Direct access to technical assistance for selected residential care agencies from a Positive Alternatives Team (PAT).

The **Best Practices Network (BPN)** is the component that we would like to sustain beyond this project. Networking is the key. All CAMHD service providers are the target group for this network initially. The purpose of a BPN is to provide a venue for collaboration, peer agency consultation and community/agency networking. The CERC Project will convene the Best Practices Network at least twice a year over the next three years and will create a web site, list-serve and newsletter to help keep network members linked.

The **Positive Alternatives Team (PAT)** is a core component of the CERC Project implementation. Over the course of 21 months, three PATs will be formed to work with six agencies providing hospital- or community-based residential care. Each PAT will consist of one member from each of the two provider agencies participating in the technical assistance (TA) component over a particular 6-month Cycle.

During the first month of the 6-month cycle, members of the team will gather information in three general domains (engagement, safety, and proactive accountability) from the perspectives of the consumer/youth, staff, and agency management. Leadership of the provider agency will work with the PAT members to develop and implement a plan unique to each agency based on the information gathered.

The CERC Project will end with a celebration conference in the spring of 2008 where agencies involved in the project will share their changes and successes.

A7872



For more information contact: Noe Perreira (808-733-9380) or Lesley Slavin (808-733-9358)